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By: *[Signature]*Printed: D. EllisO I P E  
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P A T E N T & T R A D E M A R K O F F I C E

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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FEB 24 2003

TECH CENTER 1800/2900

In re Application of: Hillman et al.

Title: MITOCHONDRIAL ADENYLATE KINASE

Serial No.: 10/006,190

Filing Date:

December 4, 2001

Examiner: Monshipouri, M.

Group Art Unit:

1652

**Box Non-Fee Amendment**

Commissioner for Patents

Washington, D.C. 20231

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Sir:

Pursuant to 37 C.F.R. §§ 1.56, 1.97 and 1.98, Applicants wish to call to the attention of the Examiner the enclosed "Supplemental List of References Cited by Applicants." The right is reserved to antedate any item in accordance with standard procedure.

Citation of the documents is not to be construed as an admission that the documents are necessarily prior art with respect to the instant invention. This submission is understood to complement the results of the Examiner's own independent search. Citation of the documents shall not be construed as a representation that a search has been made or that the cited items are inclusive of all the relevant and material citations that may be available publicly. Any NCBI report included herein may not have an accurate date for prior art purposes. Some of the documents may have markings thereon. No significance is meant to be attached to the markings.

Applicants respectfully request that the cited documents be considered by the Examiner and that an initialed copy of the Supplemental List of References Cited by Applicants be returned to Applicants.

It is believed that this disclosure complies with 37 CFR §§ 1.56, 1.97 and 1.98 and the Manual of Patent Examining Procedures § 609. If for some reason the Examiner considers otherwise, please telephone the undersigned.

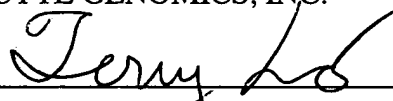
Applicants believe that no fee is due with this paper. However, if the Commissioner determines that a fee is necessary, the Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No. **09-0108**.

If there are any questions regarding the above, the Examiner is invited to call the undersigned.

Respectfully submitted,

INCYTE GENOMICS, INC.

Date: Feb 14, 2003

  
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